


Chief Sanitary Inspector.



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# STAFF OF THE PUBLIC HEALTH DEPARTMENT.

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## *Medical Officer of Health :*

F. A. BELAM, T.D., M.D., Ch.B., D.P.H., F.R.San.I.

## *Chief Sanitary Inspector :*

H. A. PERRY, M.S.I.A., F.R.S.I.

## *Senior Resident Meat Inspector :*

W. S. GREGORY, Cert.S.I.B.

## *District Sanitary Inspectors :*

D. A. OWEN, Cert.S.I.B.

A. D. HARVEY, Cert.S.I.B.

F. A. K. STREETER, Cert.S.I.B., to 25/3/52.

L. HOWARTH, Cert.S.I.B., M.S.I.A., M.R.I.P.H.A., from 21/4/52.

J. G. KELLY, Cert.S.I.B., M.S.I.A., from 1/9/52.

(Each Sanitary Inspector holds the Meat Inspector's Certificate, with the exception of  
A. D. Harvey.)

## *Clerks :*

Mr. E. E. P. SZTENCEL.

Miss E. R. ANDREWS.

Miss M. PERCY.

Miss P. BUTLER.

Miss N. L. BOXALL, to 12/1/52.

Miss E. M. HARGREAVES, from 14/1/52.

## *Public Analyst :*

D. D. MOIR, M.Sc., F.R.I.C.



## FOREWORD.

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TO THE MAYOR, ALDERMEN, AND COUNCILLORS OF THE  
BOROUGH OF GUILDFORD.

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I beg to present the Annual Report on the health of the Borough for 1952.

The Birth Rate has risen slightly, though still below that for the rest of the country, but unfortunately the infantile mortality rate is slightly higher than that for the country as a whole, though lower than that for the great towns, but definitely higher than that for the small towns. Comment has been made upon this elsewhere.

Our Death Rate is exactly the same as for 1951 and almost the same as that for England and Wales.

The chief point of interest so far as the incidence of infectious disease goes is the outbreak of poliomyelitis in October. This was an explosive outbreak fully described elsewhere in this report. Measles caused many cases and there were more scarlet fever cases than usual, but both these diseases were on the whole mild. But overall, the health of the town remained satisfactory and no cause of illhealth presents itself. It is a healthy town of well nourished people. But this is due to improved education in hygienic ways of life and the recognition of food values. To this end tends our pioneer work in Food Hygiene, which has been copied throughout the country and received favourable comment from the Parliamentary Secretary to the Ministry of Food in the House of Commons recently. The greatest praise should be given to Mr. Perry, the Chief Sanitary Inspector, for his strenuous and prolonged work in food hygiene. His work in helping to elucidate causes and contacts in the poliomyelitis outbreak deserves special mention.

But I must hasten to add that I have an excellent staff in the Health Department upon whom I can safely place the greatest trust.

The Health Committee also I would like to thank for their trust in me and the help they unfailingly give me.

F. A. BELAM, T.D., M.D., Ch.B., D.P.H.  
*Medical Officer of Health.*



## STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres): 7,184.

Registrar-General's estimate of the resident population mid-1952, civilian and members of the Armed Forces. Total 47,990.

Number of inhabited houses and flats (end of 1952), according to the Rate Books: 13,529.

Rateable Value on 31st December, 1952: £573,348.

Sum represented by Penny Rate (at 31st March, 1953): £2,260.

### EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Live Births—				M.	F.	} Live Birth Rate per 1,000 of the estimated resident population, 14.26.
Total	.....	.....	.....	363	321	
Legitimate	.....	.....	.....	341	304	
Illegitimate	.....	.....	.....	22	17	
Still Births—						} Rate per 1,000 (live and still births), 18.65.
Total	.....	.....	.....	8	5	
Legitimate	.....	.....	.....	7	5	
Illegitimate	.....	.....	.....	1	—	
Deaths—						} Death Rate per 1,000 of the estimated resident population, 11.5.
Totals	.....	.....	.....	297	255	

The **Birth Rate**, without use of the comparability factor, shows a considerable rise, but using the factor is lower, at 12.98, than that of the previous year. As the population continues to increase, and has increased by some 700 souls since the previous year, it seems extraordinary that the use of the comparability factor should so reduce the birth rate, especially in view of the fact that there were actually 30 males and 25 females more than were born in 1951. Provision of houses by the Corporation still keeps to a high level and it is impossible to avoid the conclusion that there is a definite association between re-housing and the birth rate. It is well known that many young couples avoid children until they have

a satisfactory place in which to bring them up, which is very praiseworthy, provided that there is not too long to wait, as the optimum age for child bearing is under 30 and is actually round about 23 to 28. However, there is an increased number of births this year, for which one should be duly thankful. The housing problem, which has a marked effect on the birth rate, is still being most energetically tackled and there are now 1,412 permanent and 100 temporary dwellings, all of which have been built between the end of the war and 1st June, 1953. But there are still 4,061 on the waiting list, which is an increased figure. Many of these are living in unsatisfactory conditions, but the 'points' system has, on the whole, worked well, although with whatever system there will always be complaints from those unsuccessful.

The **Death Rate** remains 11.5, exactly the same rate as in 1951. The rate for the 160 county boroughs and great towns is 12.1, and that for the 100 smaller towns 11.2, while for the country as a whole it is 11.3, so that for Guildford is average. Using the comparability factor the death rate is 10.7.

As is usual, the chief causes of death were primarily vascular and heart diseases—of the 551 deaths no less than 286, more than half, were due to these causes. Coronary disease was by far the most fatal disease. Much research work is being done into the causation of this disease, but so far all that has emerged is that, like many other diseases, e.g., cerebral haemorrhage, it is a disease of over-anxiety, worry and nervous stress. Arterial atheroma is at the bottom of both coronary disease and cerebral haemorrhage, and for the last 40 years or more nervous strain has been recognised as one of the chief causes of this condition.

Cancer comes next to the above. It caused 93 deaths, but in Guildford the infection of the lungs and bronchi were not prominent.

Most of the population of this beautiful town did succeed in attaining a ripe old age, and of the deaths 64% were aged 65 and over.

No cause of death could be assigned to any deleterious effect of climate or other local condition, and the healthy nature of this town remains unchallenged.

**Infantile Mortality.** Nineteen infants died before attaining their first birthday, and this gives an infantile mortality rate of 27.8 per 1,000 live births, which is unfortunately very much higher than the figure of 1951, which was phenomenally low (15.8). It was higher than the 27.6 for England and Wales, and much higher than the 25.8 for the smaller towns.

Causes of these deaths were prematurity in ten deaths, at ages of 7 hours, 11 hours, 1 hour, 3 hours and 8 hours; two at 2 days, 1 at 3 days, 1 at 5 and 1 at 6 days. Closer ante-natal care would alone have prevented these. Seven deaths were ascribed to congenital defects at ages 2 hours, 3 hours, 3 at 1 day, 1 at 2 weeks and 1 at 6 months. Prevention of such deaths as these has still to be sought. One death at 3 months was due to broncho pneumonia, and the nineteenth infant death could not be found in local records.

It will be seen that of these infant deaths all but two were neo-natal, that is, occurred in the first month. It is this death rate which is now almost entirely responsible for infantile mortality, and whose causation is the subject of research. Health departments and maternal and child health clinics can play little part in this work, which is almost entirely related to ante-natal causes. The general practitioner and the obstetric specialist must each play their part in this matter. Gastro enteritis, infantile diarrhoea and the catarrhal and respiratory infections of infants, which used to cause most of the infant deaths, have now almost ceased to function owing to the energetic measures taken to defeat them by increased appreciation of hygiene and cleanliness, and knowledge of baby care. Now only mother care remains.

**Old People's Welfare.** This is still receiving a very great deal of attention in this area as in most other areas of the country. It is well appreciated that the problem of the over 65's is an acute one and considerable thought has been given to the care of these people. The country-wide figure shows that only about 10% have to be catered for by institutional provision. This means that the problem is being met for the most part by the old people remaining in their own home which, of course, is the correct solution. In order to help this position the Guildford Old People's Welfare Committee have given very



careful consideration to the provision of "sitters-in," so that relatives who are looking after old people who very frequently may be difficult and troublesome to care for and are at any rate a considerable tie, may get a certain amount of relief. During the present year, May 1953, the Guildford proposals have received acceptance from the County Council and the scheme will be put in train in the near future.

**Social Services.** The Committee of the Surrey Council of Social Service have a most energetic General Secretary, and Brigadier Selby has effected a liaison with all the Old People's Welfare Committees dealing with old people in the County of Surrey and has established an Executive Committee for the exchange of views between these Welfare Committees so that all the information obtained can be pooled and used generally throughout the County.

In Guildford, the Guildford Old People's Welfare Committee have been doing good work during the year. The Visiting Committee have had 381 old people to visit regularly and 50 others have been helped in some way by 39 visitors. It is five years since the start of the Old People's Welfare Visiting Committee and the work is as necessary as ever. The great rise in the cost of living has markedly increased the request for clothes, which have been given by the W.V.S. and by Visitors and their friends. Slippers, sheets, thermos flasks, wireless licences, two cheap wireless sets, invalid food and fire guards have been supplied by the Visiting Committee Welfare Fund. Among unusual gifts from interested people were a feather bed, a foot muff and a gaily coloured woollen wrapper made by a lady in the United States, a member of the "American Share a Shawl" Organisation. Grocery parcels and vouchers from the Mayor's Christmas Fund were much appreciated. Ninety-four old folk were given 1cwt. of coal each, paid for by the Christmas grant from the General Committee.

The Rotary Club once more entertained a number of the old folk to dinner.

The Visiting Committee have applied for and obtained a wireless set from the "Wireless for the Blind Society," and one from the "Wireless for the Bedridden Society." There

are old people in Guildford who are neither blind nor bed-ridden, but are just plain lonely, who are without wireless sets. The Committee would like all old people in Guildford to have wireless sets—but they have not the means. They have received reports from landladies and neighbours about the anxiety caused when an old person's only form of heating is an oil stove. The Visitors are seriously alarmed at the danger of fire to the old people who "forget" to use fire guards even when they are given them. As usual, some very sad cases have been brought to notice.

**Laboratory Facilities.** During the year pathological and bacteriological work was carried out at the laboratory of the Royal Surrey County Hospital, the work being done as follows:—

Ear, Nose and Throat Swabs .....	36
(12 for K.L.B. testing; 23 for Haemolytic Streptococci; 1 ear swab for organisms.)	
Miscellaneous Swabs .....	42
(11 stool and 5 urine specimens for Waterworks employees; 4 specimens for Food Poisoning examinations; 22 biological examinations of Milk samples.)	

# Guildford Deaths in 1952.

CAUSE OF DEATH.	AGE AT DEATH.										TOTAL.		R.G. TOTAL.				
	Under 1		1-2		2-5		5-15		15-25		25-45			45-65		65 & over	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		M.	F.	M.	F.
Respiratory Tuberculosis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Syphilitic Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Whooping Cough ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Poliomyelitis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Infective Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cancer of Stomach ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" Lung or Bronchus ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" Breast ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" Uterus ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" other area ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diabetes ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Vascular Lesion of Nervous System ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Coronary Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Hypertension and Heart Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Heart Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Circulatory Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Influenza ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Bronchitis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Respiratory Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ulcers of Stomach or Duodenum ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Gastro Enteritis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Nephritis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Congenital Malformations ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Defined Disease ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Motor Accidents ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Accidents ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Suicide ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Homicide ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	11	7	1	1	4	1	6	3	19	12	76	48	179	184	296	256	255

# Birth Rate, Death Rate, and Analysis of Mortality in the Year 1952.

	Rate per 1,000 Population.		Annual Death-Rate per 1,000 Population.						Rate per 1,000 Live Births.	
	Live Births.	Still Births.	All Causes.	Typhoid and Paratyphoid Fevers.	Smallpox.	Whooping Cough.	Diphtheria.	Influenza.	Diarrhoea and Enteritis under 2 years.	Total Deaths under 1 year.
England and Wales	15.3	0.35	11.3	0.00	0.00	0.00	0.00	0.04	1.1	27.6
160 County Boroughs and Great Towns including London	16.9	0.43	12.1	0.00	0.00	0.00	0.00	0.04	1.3	31.2
160 Smaller Towns Resident Populations 25,000 to 50,000—1951 Census	15.5	0.36	11.2	0.00	0.00	0.00	0.00	0.04	0.5	25.8
London	17.6	0.34	12.6	0.00	0.00	0.00	0.00	0.05	0.7	23.8
GUILDFORD	14.26	0.27	11.5	0.00	0.00	0.02	0.00	0.08	0.00	27.8

The Maternal Mortality Rates per 1,000 } Total Births:    Abortion with sepsis—0.07    Abortion without sepsis or toxæmia—0.04  
England & Wales as follows: — }    Puerperal Infection—0.09    Other Maternal Causes—0.20

GUILDFORD: Abortions with sepsis—0.00 per 1,000 live births.



**Ambulance Work.** Ambulance work is now under the Surrey County Council, the St. John Ambulance Brigade carrying out the work as agents.

The following figures summarise the duties performed during 1952:—

	No. of Members.	Public Duty. Hours	Transport. Hours	Hospital and Clinic. Hours	Miscel- laneous. Hours
Corps and Ambulance Divisions .....	69	1,177 $\frac{3}{4}$	8,862	96	940
Nursing Division .....	43	1,822	5,079 (2,765 Night Duty)	4,233	—
Student Nursing Division .....	19	157 $\frac{1}{2}$	—	227 $\frac{1}{2}$	—
Ambulance & Nursing Cadet Divisions, including probationers .....	225	399 $\frac{1}{2}$	—	553 $\frac{1}{4}$	—
	356	3,556 $\frac{3}{4}$	13,941	5,109 $\frac{3}{4}$	940

First Aid cases treated on Public Duty .....	315
Medical Comforts loaned .....	865
N.H.S.R. Members .....	19

Miscellaneous duties include Lectures, etc., to G.L.B. and Youth Movements, and also training of Civil Defence personnel.

Transport duties include Train Escorts, and included in the Public Duties are the hours which members undertook in London at the Funeral of the King.

#### Transport Duties.

Six Ambulances, two Sitting Cars (one Mobile Dressing Station for Public Duties).

Number of patients removed—

Surrey County Council .....	10,901	Mileage	113,400
Brigade .....	69	„	1,972
Road accidents, number of cases .....	603	„	3,305
Other accidents, number of cases .....	405	„	2,379
Total .....	11,978	Mileage	121,056

**Nursing in the Home.** This work is carried out by the Queen's District Nursing Association under the Surrey County Council. The work done by these excellent, highly-trained and hard-working nurses is as follows:—

### Children Under Five Years Nursed by Queen's Nurses.

	No. of Cases.	Visits Paid.	Transferred to Hospital.
Measles .....	3	16	—
Ophthalmia .....	—	—	—
Whooping Cough .....	—	—	—
Scarlet Fever .....	1	5	—
Influenza .....	—	—	—
Pneumonia .....	—	—	—
Diphtheria .....	—	—	—
Other Diseases .....	127	740	—
	<u>131</u>	<u>761</u>	<u>—</u>

### Children Over Five Years Nursed by Queen's Nurses.

	No. of Cases.	Visits Paid.	Transferred to Hospital.
Pneumonia .....	1	6	—
Measles .....	1	5	—
Whooping Cough .....	—	—	—
Influenza .....	—	—	—
Scarlet Fever .....	2	3	—
Other Diseases .....	225	1,198	—
	<u>229</u>	<u>1,212</u>	<u>—</u>

### The Maternity Work.

Midwifery admissions .....	171	
Maternity admissions .....	73	
Ante-natal admissions .....	23	
	<u>267</u>	
Midwifery cases .....	103	Visits 1,961
Maternity cases .....	10	„ 268
Ante-natal .....	—	„ 738
Post-natal .....	—	„ 66
<b>General Work—</b>		
Cases .....	1,860	Visits 36,290
Number of Ante-natal Sessions .....		98
Number of Attendances .....		2,552

**Number of New Bookings—**

District .....	124
Maternity Home .....	307

**Number of Municipal Clinics—**

Ante- and Post-natal Sessions .....	33
Ante- and Post-natal Attendances .....	135

**Maternity Provision.** Fifty-seven maternity beds are provided at St. Luke's Hospital. At this Hospital the total of 968 births took place in 1952, of which 334 were to residents and 634 to non-residents.

Mount Alvernia Nursing Home offers 17 beds, and a total of 170 births took place there, of which 51 were to residents and 119 to non-residents.

At the ten beds of the Jarvis Home there were 71 births to non-residents and 173 to residents.

Thus, of institutional births there were 1,382 (558 residents and 824 non-residents). This gives a percentage of 93.1% of total births (residents and non-residents), and 85.1% residents only.

**Clinics and Treatment Centres.** Clinic Sessions were as follows (Maternity and Child Welfare):—

**Arundel House, Stoke Road.**

Tuesday morning, Wednesday and Friday afternoons.

**North Road, Stoughton.**

Monday morning, Tuesday and Thursday afternoons.

**Village Hall, Merrow.**

First, third and fifth Monday afternoons.

**Community Hall, Foxburrows Avenue, Westborough.**

Monday afternoons.

**Onslow Village Hall.**

First, third and fifth Wednesday afternoons, from 2/1/52.

**Tuberculosis—Dispensary.** Sessions at the Chest Clinic, Tower House, Epsom Road, Guildford, are now:—

Monday and Wednesday .....	at 1.30 p.m.
Friday .....	at 9.30 a.m.

The Chest Physician, Dr. Cooper, visits cases too ill to attend, on request of the Practitioner in charge.

**Venereal Diseases.** The County Council Clinic was held at the Royal Surrey County Hospital on Tuesdays and Fridays, from 5 to 7 p.m., and Saturday mornings, 9.30 to 11.30 a.m., for males, and Mondays, from 2 to 7 p.m., and Thursdays, 9.30 to 11 a.m., for females. Contacts are dealt with from these Clinics.

**Notification of Births.** During 1952, 344 male and 311 female births were notified to residents, a total of 655, three more than in 1951. There were 13 still births (20 in 1951), 8 male and 5 female. In all, there were in Guildford 1,483 births, 655 to residents and 828 to non-residents, so that non-residents take up most of the beds in institutions and necessitate early booking by residents.

Of the births notified, those of residents took place at the following places:—

St. Luke's Hospital	.....	.....	.....	.....	.....	.....	.....	334
Mount Alvernia	.....	.....	.....	.....	.....	.....	.....	51
Jarvis Home of the Queen's Nurses	.....	.....	.....	.....	.....	.....	.....	173
Home	.....	.....	.....	.....	.....	.....	.....	97

Of the births to non-residents in Guildford, venues were:—

St. Luke's Hospital	.....	.....	.....	.....	.....	.....	.....	634
Mount Alvernia	.....	.....	.....	.....	.....	.....	.....	119
Jarvis Home of the Queen's Nurses	.....	.....	.....	.....	.....	.....	.....	74
Home	.....	.....	.....	.....	.....	.....	.....	1

The Registrar-General assigns 363 male and 321 female births to Guildford. This indicates that 29 more births were registered than were notified. 684 registered and 655 notified.

**Hospital Provision.** The South West Metropolitan Regional Hospital Board maintain two hospitals in Guildford, the Royal Surrey County Hospital with 229 beds, and St. Luke's Hospital with 404 beds.

**Supervision of Nursing Homes.** Of the two registered Nursing Homes in Guildford, one is under the Hospital Board—the Jarvis Home of the Queen's Nurses—and one is exempt—the Mount Alvernia Nursing Home. Mount Alvernia still remains liable to inspection under the Public Health Act, 1936. It offers 35 general and 17 maternity beds, and during 1952 dealt with 678 general and 166 maternity patients. Both these Homes were duly inspected during the year.



## INFECTIOUS DISEASES.

Hospital provision remains unchanged. Cases are sent to Ottershaw Hospital or, if full, to Farnham Isolation Hospital. Contact is made daily by telephone with Ottershaw or Farnham (when used) to ensure that no case of infectious disease whether confirmed or not has been admitted unknown to the Health Department. It is the case sent as a query for diagnosis which causes most trouble, as the doctor sending it does not wish to notify until he is certain of the diagnosis, but this causes delay which may well be serious if the case is confirmed. Contacts cannot be dealt with unless known and they will not be known unless the Sanitary Inspector has visited and enquired. There were 827 notifications of infectious disease during 1952. Of these, 601 were measles and 88 whooping cough, as opposed to 586 measles and 145 whooping cough in 1951. It would appear that biennial incidence was not followed, though this is usual. A considerable accumulation of non-immune children must have occurred and these were in turn infected in 1952.

**Poliomyelitis.** An outbreak of this disease occurred during October. In all, 24 cases were notified and there were two deaths, both in young adults. Although a few sporadic cases of this disease occur from time to time in Guildford, and in 1949 there were ten cases, in none was any connection between cases found. But in the 24 cases of 1952, those occurring in September and October could be connected one with the other in many instances. This is an unusual phenomenon. Connections between cases have been established in previous outbreaks in this and other countries, but it is not usual to be able to connect so many cases as in the Guildford outbreak.

The outbreak started with the return from hospital in September of a boy of 9, J.B., who had had a mild attack. A few days after his return home his sister contracted a 'cold,' but attended school. A classmate aged 6, J.M., of this girl sickened with what turned out to be a severe attack of the disease four days after the boy's return from hospital. From the same class another girl of 6, V.P., sickened fifteen days later, and so, a week later again, did an adult of 25, J.H., who had come into intimate contact with the severe case.

The Ministry of Health were notified and supplied through their senior medical inspector three facts of outstanding

importance. These were:—(1) Incubation period of the disease is 4 to 33 days; (2) Healthy persons can acquire the carrier state and then spread the disease to others; (3) The disease is infectious 3 to 4 days before the onset of symptoms.

This information helped markedly in the tracing of infection. Investigations were carried out with the most meticulous care by the Chief Sanitary Inspector, who missed nothing and found contacts with unerring skill and patience. His work was most praiseworthy. By these means the spread of infection through a nursery was traced and the following train of infection was discovered.

A woman, H.L., sickened on September 22nd but was not notified until October 2nd, owing to difficulty of diagnosis. Her child attended a nursery from September 1st to 22nd. Also at this nursery was another child, A.T., who sickened on September 23rd. At the same nursery a child, R.S., slept on 11th, 17th and 18th September. Two classmates of R.S.—S.B. and A.H.—sickened on October 4th and a third, F.W., on October 7th. The father of R.S. sickened on October 13th. Also D.F., the husband of a helper at the nursery, sickened on October 6th. On September 29th, S.B. attended a party at which was an adult who sickened on October 6th, and a boy who sickened on October 12th.

A probable case to case infection occurred with the disease in a man, P.H., who developed a fulminating attack on October 8th and died on October 10th. A friend, P.K., was taken to his home immediately after a tooth extraction on 7th October and developed the disease four days later.

Incubation periods for some of the cases were fixed so far as possible. In other cases incubation periods were uncertain. In addition to the above cases in which connections, however tenuous, could be shown, there were during 1952 other cases between which no link could be shown. Of these, five occurred in the first seven months. The summary of all cases is as follows:—

Case 1, aged 6, onset 22/2, in hospital 27/2 to 23/3, and referred for physiotherapy treatment for left arm.

Case 2, aged 9, onset 25/4, non-paralytic.



Case 3, aged  $4\frac{1}{2}$ , onset 11/7, in hospital 16/7 to 14/9, with no resulting paralysis.

Case 4, aged 5, admitted to St. Luke's Hospital 6/8, transferred to Ottershaw Isolation Hospital 8/9, and thence to the Rowley Bristow Hospital for orthopaedic treatment, whence she was discharged 5/12. She still walked with a limp in March, 1953, and tired easily.

Case 5, a man of 27, onset 5/8, admitted to hospital 7/8. Paresis right arm and hand and slightly also left, with some weakness of intercostal muscles. Discharged to orthopaedic hospital.

Case 6, a boy of 9, onset 26/8, admitted to hospital 31/8, and discharged 22/9 as an abortive non-paralytic case.

Case 7 was a girl of 6, onset 26/9, admitted to hospital 27/9, transferred to orthopaedic hospital 21/11, and still showing weakness of the left leg. She was the case presumably infected by the sister of the Case 6 (four days incubation).

Case 8 was a woman of 22, onset 22/9, admitted to hospital the same day, not notified until 2/10, discharged hospital 24/10, and still had weakness of left triceps and serratus anterior. Her child of 2 had been at the nursery referred to above from 6/9 to 13/9.

Case 9 was a girl of 6, onset 4/10, first nursed at home, admitted to hospital 13/10, and discharged 27/10, non-paralytic. Classmate of R.S. and Case 11. Incubation period 17 days.

Case 10 was a man of 34 whose onset was 8/10, with a fulminating attack from which he died early on 10/10, with paralysis of respiratory muscles.

Case 11 was a girl of 5, classmate of R.S. and Case 9. Onset 4/10, admitted to hospital 8/10, diagnosed pneumonia at first, later changed to mild poliomyelitis. She was discharged home on 27/10 quite fit. Her incubation period was 11 days.

Case 12 was a boy of 3 who had been ill for a month before notification as poliomyelitis on 10/10. Admitted to hospital 6/10, but taken home next day and regarded as a mild case and non-paralytic.

Case 13 was a woman of 26, who attended a party on 29/9 at which was Case 11. She sickened on 6/10 and thus had an incubation period of 8 days. This case remained paralysed for several weeks, having been admitted to hospital on 11/10 and discharged 23/12, still unable to walk.

Case 14 was a boy of 11 months. Onset 11/10, admitted to hospital 13/10, left shoulder muscles paralysed. He was transferred to an orthopaedic hospital on 13/11. He received his second inoculation against diphtheria and whooping cough on 11/9 into his left deltoid, one month before the onset of poliomyelitis.

No connection with other cases was discovered.

Case 15 was a boy of 6, who also attended the same party at which Cases 11 and 13 were present. If caught there, his incubation period would be 14 days, as he sickened on 12/10 and was removed to hospital 13/10, discharged 4/11 as a non-paralytic case.

Case 16, a girl of 5, was not confirmed as poliomyelitis.

Case 17 was a man of 25, husband of a worker at the nursery above referred to. Onset 6/10, a mild paralytic case who recovered satisfactorily. His infection could have been carried to him by his wife.

Case 18, a girl of 6 and classmate of R.S. and Cases 11 and 9. Her incubation period would be about 20 days. Onset of disease 7/10, with weakness of oral muscles. She was in hospital from 15/10 to 4/11, and was discharged fit.

Case 19 was a man of 34, father of R.S. Onset 13/10. He was in hospital from 17/10 to 1/11, and was a mild case who recovered completely. His incubation period 26 days.

Case 20 was a girl of 5, unconnected with other cases. Onset 12/10, admitted to hospital 17/10, a paralytic case discharged hospital 1/11 and attending out-patients for exercises for weak right hand.

Case 21, a girl of 7, unconnected with other cases. Onset 11/10, in hospital 17/10 to 15/11, and then attending out-patients for exercises for paresis of right hand.

Case 22, a woman of 25, who was in contact with Case 7 on 26/9, sickened 17/10 with paralysis of left shoulder and right leg, and died 30/10. Her incubation period was 21 days.



Case 23, a girl of 4, who sickened 25/10 and developed a sore throat and swollen glands. She became lethargic on 29/10 and vomited and complained of pains in back and head. On 2/11 she became rigid, speechless and unconscious, neck rigid. Admitted to hospital where the doctor thought she was in extremis at 9 a.m. But at 4.30 p.m. she regained consciousness and after facial paralysis had persisted for three days it disappeared and the child made a complete recovery. Unconnected with other cases.

Case 24, a boy of 5. Onset 4/11, could not lift head from pillow, admitted hospital same day. Legs weak, left arm and foot paralysed at first but later recovered. An unconnected case.

Case 25, a man of 34. Onset 4/11, admitted hospital 6/11, discharged 1/1/53. Non-paralytic, unconnected with previous cases. This was the last case of the year.

Most careful follow-up of contacts was undertaken. The class in which all the cases at that school occurred was closed for three weeks and a private school at which attendance had dropped severely was closed for a period perforce though it was not really considered necessary. All contacts being excluded, school closure seemed superfluous.

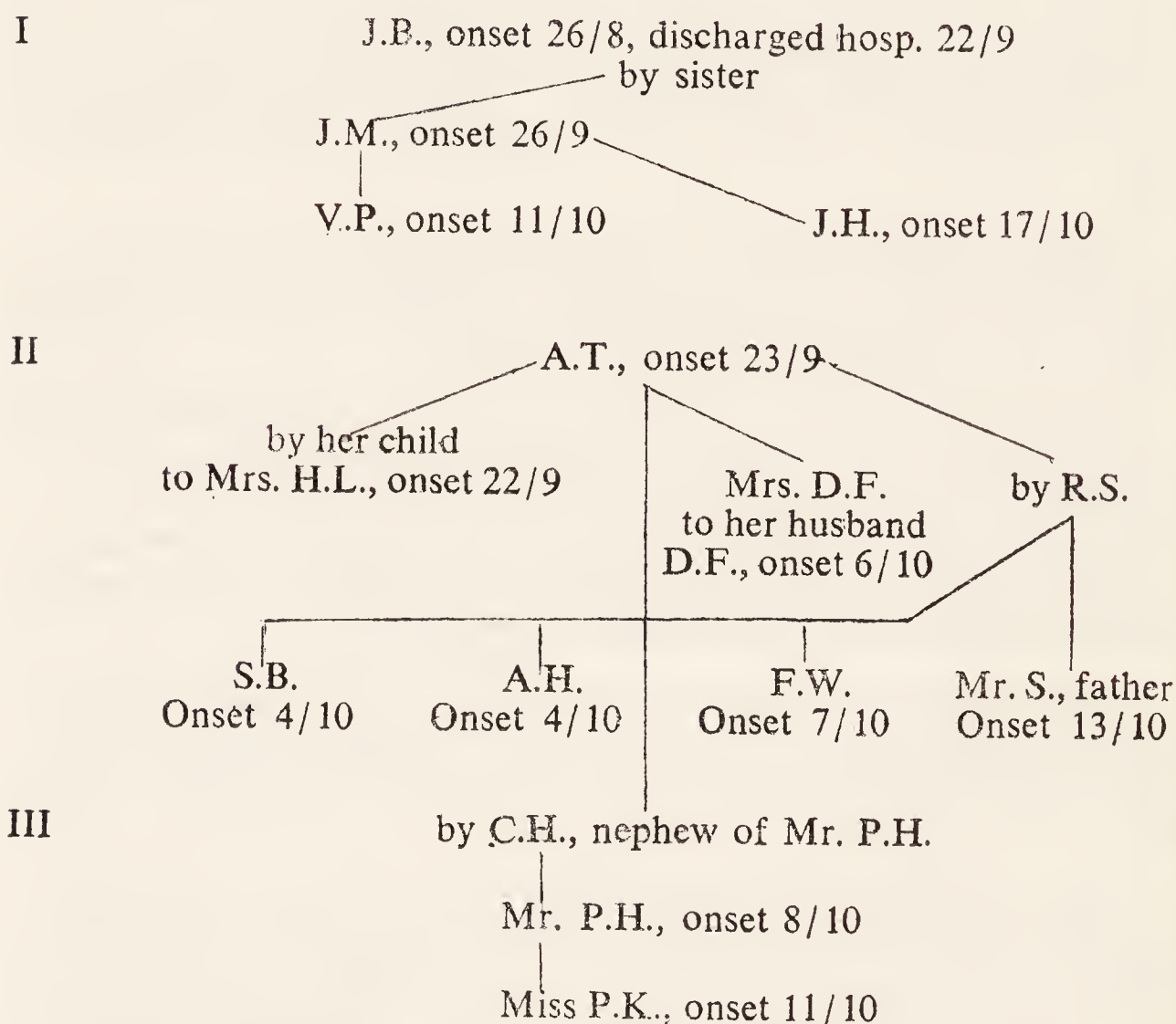
All that seems necessary is exclusion of contacts (adults) who are food handlers or in charge of children and of really close child contacts, e.g., bosom friend sits alongside in class, etc.

This outbreak, however, taught the lesson of the healthy carrier. Fortunately definite proof of the carrier state was forthcoming, samples of faeces for virus and blood for testing were sent to the Public Health Laboratory at Colindale on the request of the Ministry of Health, and reports were received in May, 1953. The Brunhilde type of virus was isolated from the faeces of the three children of Case 19, including R.S., who was connected with three other cases. All these three children remained healthy.

It remains for me to express my appreciation of the assistance given me by Dr. Bradley and Dr. Thomson of the Ministry of Health, not only regarding the outbreak itself, but also in helping personally to arrange a symposium on poliomyelitis for the doctors of the area, which was attended

by 50 practitioners, and at which Dr. Bradley dealt with the administration angle, Dr. McCallum of the Colindale Laboratory with the virus angle, and Dr. Kinnier Wilson with the hospital angle. This was most educative and much appreciated by the medical men present.

The charts below show in tabular form what has been described:—



**Scarlet Fever.** Fifty-six cases of Scarlet Fever were notified, a considerable increase on the 33 of 1951. But again the disease was mild. Thirty-one cases were admitted to hospital and 33 of the cases were in the 5-9 age group. So mild was the disease and so short was the period during which the child appeared to be ill, thanks to penicillin, that on several occasions the enforced school exclusion periods were queried by practitioners, on the ground that they were unnecessarily long. But though the throat will clear rapidly and a swab taken will be negative, if that same throat is swabbed three

or four days later after penicillin has been stopped the haemolytic streptococcus will be found to have returned and the child therefore will be again capable of spreading infection. Under these circumstances the school exclusion periods laid down must be strictly adhered to. Another difficulty in the control of scarlet fever lies in the fact that very many children and some adults are infected by the haemolytic streptococcus and will develop sore throat only, without diagnosable symptoms of scarlet fever and thus cannot be notified as such; yet they can spread the disease to others in whom a typical attack of scarlet fever may develop. Throat swabs, therefore, assume considerable importance for the detection of carriers of infection. In one case the parent had had a sore throat previously. Apart from an obvious school infection and one family in which three cases occurred and another two, no definite traceable connection between cases was discovered.

**Measles.** These notifications still remained high, 601 against 586 in 1951. This is unusual, as biennial increased incidence is the rule. The disease fortunately remained mild and complications were prevented by appropriate prophylactic treatment. Only three cases went into hospital, which proves that home care was satisfactory. On receipt of a notification of this disease, the Health Visitor is at once informed and visits the home as a priority in order that she may supplement the advice of the doctor and show the mother how to carry it out to the best effect for nursing of the case and prevention of spread of the disease.

**Whooping Cough.** Eighty-eight notifications of this disease were received, a considerable drop on the 145 of 1951. Six of the cases went into hospital, and the above remarks relative to the work of the Health Visitor likewise apply to this disease. Unlike measles, however, immunisation against whooping cough has been carried out in the Borough since 1936. The beneficial effect of this as a preventative against a disease which is responsible for so much debility and morbidity in small children is so obvious as to need no further labouring. In 1951, of 145 cases of whooping cough, only two had been immunised within twelve months of the attack. The immunity of the other 13 cases had therefore persisted for 7 (1), 6 (2), 5 (1), 4 (6) and 3 (3) years and had therefore postponed attack until an age when the children were better able to cope with it. During 1951, 354 children were immunised against whooping



cough, of which 340 were under two years of age. In 1952, of the 372 children immunised, 356 were under two years. Comparing these figures with the average number of children born each year, it will be seen that slightly more than half are being immunised against whooping cough before they are two years old.

**Diphtheria.** No case of this disease was notified during the year. Immunisation against diphtheria was carried out with unabated vigour and the response of the parents is excellent. 487 children were immunised during the year at the ages shown in the table. 649 reinforcing injections were given. The figures for child population are no longer being supplied by the Registrar-General, so they have had to be ascertained by other means. The number of children from 0-4 have been obtained by taking the figure supplied for 1951, subtracting the 5-year-olds and adding the new births, allowing for any mortality. The figures for children aged 5-14 have been similarly obtained. Using these figures, children aged 0-4 number 3,260, and 1,826 of these have been immunised, giving a percentage of 56%. There were 6,821 children aged 5-14, and of these 5,238 have been immunised, giving a percentage of 76%. These percentages compare fairly favourably with those of 1951, which were 56% of 0-4 years, and 84% of 5-14 years, giving a total percentage of 70%, whereas that for 1952 is 69.87%.

It is of vital importance that this percentage be adhered to, or even bettered, as there is still no indication that diphtheria is any milder, and those who do catch the disease have a mortality rate as high as ever. In 1951 the case fatality rate was 5%, which is actually higher than the average case mortality rate since 1939. But in 1939, in England and Wales, there were 2,133 deaths out of 47,343 notified cases, whereas in 1951 there were 33 deaths out of 664 notified cases. The effect of diphtheria immunisation is thus strikingly illustrated. By 1944 the notified cases were 23,199—half those of 1939, and by 1946 this figure was again halved, being only 11,986, and now again in 1951 the figure dropped to 664.

The reason for the high case mortality rate, despite improved methods of treatment is, as it used to be before case rates had dropped at all, delay in commencing treatment owing to the diagnosis not having been established. As I said in



my reports of years ago, if in doubt of the diagnosis of any sore throat, and if there is any suspicion it might be diphtheria, give anti-toxin and do not await the swab result.

The numbers in each age group now immunised are shown in the subjoined table:—

Year of Birth.	Total number Immunised.	Year of Birth.	Total number Immunised.
1932	..... 752	1943	..... 394
1933	..... 813	1944	..... 389
1934	..... 732	1945	..... 448
1935	..... 719	1946	..... 593
1936	..... 330	1947	..... 585
1937	..... 528	1948	..... 497
1938	..... 542	1949	..... 500
1939	..... 543	1950	..... 435
1940	..... 509	1951	..... 355
1941	..... 303	1952	..... 39
1942	..... 404		

**Encephalomyelitis.** In 1951, a child of 5 years died as a result of encephalomyelitis supervening upon measles. This year exactly the same disease attacked a child of three years following chickenpox. The onset of chickenpox was April 21st. He was admitted to hospital on May 4th with a history of five days' headache, trembling and inability to walk and use his arms and hands steadily. On admission to hospital he exhibited unilateral cerebellar signs followed next day by marked inco-ordination. Lumbar puncture showed normal pressure and cerebrospinal fluid. The child's condition slowly improved and he was discharged home on May 12th, walking fairly well with support and able to feed himself. He made a complete recovery.

**Vaccination.** Out of a total of 684 births, 283 were vaccinated. This gives a percentage of 41.37%, which is a considerable improvement upon the 35.44% of 1951, and much better than the 29.6% of infant vaccinations for England and Wales for 1951. It is still noteworthy, however, that the pre-1948 percentage of 70% is not attained as it was each year in Guildford when vaccination was compulsory and the Vaccinating Medical Officer visited the homes of the new born babies. It is to be hoped that this fall in infantile vaccination will not have serious consequences, as recent outbreaks of

smallpox have proved that vaccination after contact with the disease is frequently too late to protect. Infantile vaccination is in the best interests of the individual in that complications are fewer and less troublesome at this age.

**Tuberculosis.** There was considerable difference between the incidence of this disease in 1951 and 1952. In 1951, 17 male and 17 female cases of pulmonary disease were notified, and in 1952, 9 male and 14 female, and of non-pulmonary in 1951, 2 male and 7 female, and in 1952, 5 male and 2 female. Deaths in the two years were:—1951, 6 male and 3 female; and in 1952, 7 male and 3 female due to pulmonary infection. During 1952, 49 cases were added and 43 removed from the register. The number of pulmonary cases remaining on register were, in 1951, 189 male and 127 female, and in 1952, 195 male and 132 female. Non-pulmonary cases on register in 1951, 36 male and 52 female, in 1952, 37 male and 46 female.

The housing of the tuberculous was kept constantly in mind and every effort was made to get a separate bedroom for each infectious case. The position in 1952 was as follows:—13 patients could have separate bedrooms and only one case lived in overcrowded conditions. During 1952, 9 male and 14 female new cases were notified and 18 cases were transferred from other areas. Seven cases of non-pulmonary tuberculosis were notified, but in none was the milk supply found infected.

The work done by the Mass Radiography Unit of the South West Metropolitan Regional Hospital Board in 1951 was so much appreciated and its importance considered so great that when the Unit visited Guildford a year later in October, 1952, numbers presenting themselves for X-ray more than doubled. The figures for 1952 were:—

	Males.	Females.
Total number X-rayed .....	2,747	4,441
Pulmonary tuberculosis, <b>active</b> .....	2	1
Pulmonary tuberculosis, <b>inactive</b> .....	103	138
Non-tuberculous abnormalities .....	114	120
Cases requiring further investigation .....	28	14
Failed to attend for large films .....	4	—

Figures for the County showed that Guildford district had the lowest incidence of pulmonary infection, which testifies

very clearly as to its health. The rate was only 0.4 per 1,000 examined. Of factory groups, one Guildford group of 502 had no cases, and one of 1,067 had two—a rate per 1,000 of two.

After-care of the tuberculous is looked after by the special voluntary After-Care Committee. From the Christmas Seal sale, the receipts from which form the sole source of revenue, £123 10s. 9d. was obtained, which is a considerable increase on that obtained in 1951. This money is spent on pocket money for patients in hospital, extra clothing, bedding, travelling expenses to allow of visitation in hospital or sanatorium, occupational therapy materials, and to assist children of tubercular parents to have a holiday annually.

## Notifiable Diseases (other than Tuberculosis) during the Year 1952.

Disease.	Total cases notified.	Cases admitted to hospital.
Scarlet Fever	56	31
Diphtheria	—	—
Pneumonia	5	—
Dysentery (Sonne)	—	—
Acute Poliomyelitis	24	20
Acute Encephalomyelitis	1	1
Measles	601	3
Whooping Cough	88	6
Erysipelas	7	—
Meningitis	—	—
Enteric	—	—
Ophthalmia Neonatorum	1	—
Puerperal Pyrexia	33	28
Chickenpox	11	3
Totals	827	92

## Total Cases of Infectious Diseases in Age Groups.

			Under 1	1—2	3—4	5—9	10—14	15—24	25—45	45—64	65 & over
Scarlet Fever	.....	.....	—	4	11	33	5	1	2	—	—
Pneumonia	.....	.....	—	—	—	2	—	—	—	1	2
Acute Poliomyelitis	.....	.....	1	—	4	11	—	1	7	—	—
Acute Encephalomyelitis	.....	.....	—	—	1	—	—	—	—	—	—
Measles	.....	.....	7	109	157	316	9	2	1	—	—
Whooping Cough	.....	.....	8	15	14	47	2	—	2	—	—
Erysipelas	.....	.....	—	—	—	—	—	1	1	4	1
Ophthalmia Neonatorum	.....	.....	1	—	—	—	—	—	—	—	—
Puerperal Pyrexia	.....	.....	—	—	—	—	—	10	23	—	—
Chickenpox	.....	.....	—	—	1	8	1	1	—	—	—
Totals	.....	.....	17	128	188	417	17	16	36	5	3

## Tuberculosis: New Cases and Mortality during 1952.

Age periods.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	—	—	—	—	—	—	—
1—5	—	—	1	—	—	—	—	—
5—10	—	—	1	—	—	—	—	—
10—15	—	1	—	—	—	—	—	—
15—20	—	4	—	—	—	1	—	—
20—25	1	3	1	—	1	—	—	—
25—35	2	3	1	—	—	—	—	—
35—45	2	1	—	1	3	—	—	—
45—55	2	1	1	1	—	—	—	—
55—65	—	1	—	—	3	—	—	—
65 & over	2	—	—	—	—	2	—	—
Totals	9	14	5	2	7	3	—	—



# Annual Report

of the

# Chief Sanitary Inspector

for 1952

## WATER SUPPLIES.

The Guildford, Godalming and District Water Board was formed on 1st October, 1952, by the merging of the Guildford, Godalming, Cranleigh, Hurtwood, St. Martha's and Shere Undertakings.

The Undertaking thus formed is approximately 140 square miles in extent, containing a population of about 102,000 persons.

There are 46 sources of supply, which include deep borings, wells, springs and gravitating sources, with twelve pumping stations supplying water from these sources.

The estimated total annual water consumption in the Board's area is 1,635,000,000 gallons, with an average daily consumption of 4,480,000 gallons, giving a figure of 43.5 gallons as the gross consumption per head per day (including industrial and other purposes).

The water supply for Guildford Borough is derived from deep bore-holes in the chalk. The pumping stations are situate as follows:—

1. Josephs Road Pumping Station (3 bore-holes).
2. Milmead Pumping Station (2 bore-holes).
3. Dapdune Pumping Station (1 bore-hole).

During the year ended 31st December, 1952, the total consumption of water in the Guildford water area was 964,406,000 gallons, an average of 2,642,208 per day. The average daily consumption per head of population in the Borough water area was 50.81 gallons, domestic consumption being 37.38 gallons, and the remaining 13.43 gallons being used for industrial and other purposes.

Extensions to water mains in the Borough totalling approximately 3.07 miles were carried out during the year.

## WATER SAMPLING.

Until the formation of the Guildford, Godalming and District Water Board, the Health Department was responsible

for all water sampling in the Borough. Since 1st October, 1952, sampling by the Health Department is being carried out on a modified scale, as a check for public health purposes only.

During the year 101 samples of drinking water were taken for chemical analysis, and 142 samples were taken for bacteriological examination, from the following sources:—

			Chemical Samples.		Bacteriological Samples.	
			Satisfactory.	Unsatisfactory.	Satisfactory.	Unsatisfactory.
Ladymead Pumping Station			22	—	45	—
Millmead Pumping Station			22	—	46	1
Dapdune Pumping Station			56	—	42	—
Private Premises:—						
Mains Supplies	.....	.....	1	—	7	—
Deep Wells	.....	.....	—	—	1	—
			101	—	141	1

### Dapdune Pumping Station.

Special attention was still being paid to the water supply from the Dapdune Pumping Station during the year, chiefly concerning the free ammonia content, which varied between 0.048 p.p.m. to 2.1 p.p.m. (average content 1.61 p.p.m.). This high content of free ammonia is considered to be due to contamination from gas liquors, and two large gas liquor tanks have been replaced, and it is expected that the reports on this supply will show gradual improvement in regard to the presence of free ammonia.

The Analyst reported that tar acids and thiocyanates were not present in detectable amounts, and the water was considered suitable for public supply purposes.

### SWIMMING BATHS.

There are two Public Swimming Baths in Guildford:—

- (1) Castle Street Baths, owned by the Corporation. Eleven slipper baths also available at these premises.
- (2) Guildford Lido Open-air Swimming Pool, owned by the Corporation.

There are also two children's paddling pools, one at Stoke Park and one at Guildford Lido,

During the year the following samples of swimming bath waters were submitted for examination:—

	Chemical Samples.		Bacteriological Samples.	
	Satisfactory.	Unsatisfactory.	Satisfactory.	Unsatisfactory.
Castle Street Baths .....	14	—	13	—
Lido Swimming Pool .....	8	—	8	—
Paddling Pool, Stoke Park	—	—	2	5
Lido Paddling Pool, Stoke Park .....	—	—	6	2

In the case of the Lido Paddling Pool, the water is now subjected to the “break point” chlorination system employed in respect of the main swimming pool.

## DRAINAGE AND SEWERAGE.

**Sewers.** The construction of new soil and surface water sewers at the Bushy Hill Housing Estate, Merrow, referred to last year, has been substantially completed.

**Drainage.** Tests were applied to 115 old drains and 23 new drains; 21 existing drains were reconstructed and 62 choked drains freed from obstruction.

**Cesspools.** The number of cesspools remaining in the Borough at the end of December, 1952, was 122. Thirteen new cesspools were constructed during the year, but two sewerage schemes have been approved to take drainage from 10 properties at present served by cesspools.

Cesspools are emptied by means of mechanical plant at regular intervals, or on request.

## PUBLIC CLEANSING—REFUSE DISPOSAL.

The system of refuse disposal is chiefly by incineration and the remainder by controlled tipping.

From figures supplied by the Borough Surveyor, the weight of house and trade refuse disposed of during the year was 11,053 tons. The period of time elapsing between collection of domestic refuse varied from seven to ten days, and the service was generally well maintained.

During the year 86 dustbins were found to be defective and were replaced in 70 instances,



# SANITARY INSPECTION OF THE AREA.

## Number and Nature of Inspections Made.

Number of—

Complaints investigated (excluding rats and mice) .....	265
Nuisances found .....	479
No nuisances found .....	120
Inspections under Housing Act, 1936 (first visits) .....	334
Inspections under Housing Act, 1936 (sub-visits) .....	602
Inspections of Requisitioned Properties .....	229
Inspections re Prospective Council House Tenancies .....	227
Visits to Properties under Notice .....	1,242
Visits to Licensed Premises, Clubs, etc. ....	31
Visits to Cases of Infectious Disease .....	88
Enquiries re Infectious Diseases .....	144
Inspections re Verminous Premises .....	17
Investigations re Overcrowding .....	20
New Drains Tested .....	23
Old Drains Tested .....	115
Visits re Cesspools .....	58
Visits re Tents, Vans, Sheds, etc. ....	12
Visits to Schools .....	26
Visits to Places of Public Entertainment .....	23
Visits to Factories .....	661
Visits to Factories, no mechanical power .....	120
Visits to Workplaces, including Offices .....	216
Visits to Outworkers .....	6
Visits to Slaughterhouses .....	636
Visits to Cattle Market .....	89
Visits to Butchers' Shops .....	91
Visits to Fishmongers' Shops .....	64
Visits to other Food Shops, Market Stalls, etc. ....	682
Visits to Cooked Food Premises .....	26
Visits to Cafes, Restaurants, etc. ....	255
Visits to Bakehouses .....	84
Visits to Ice Cream Premises .....	177
Ice Cream Samples obtained .....	122
Visits to Dairies and Milkshops .....	91
Bacteriological Milk Samples obtained .....	275
Bacteriological Rinses, Churns, Coolers, Bottles, etc. ....	49
Bacteriological Swabs taken from washed utensils, etc. ....	51
Bacteriological Water Samples obtained .....	141
Bacteriological Samples of Swimming Bath Water .....	36
Chemical Samples of Water .....	101
Chemical Samples of Swimming Bath Water .....	22
Visits to Offensive Trades .....	136
Visits to Fried Fish Shops .....	5
Visits re Keeping of Animals, including Pet Animals Act, 1951 .....	48
Visits to Rats and Mice Infestations (first visits) .....	721
Visits to Rats and Mice Infestations (sub-visits) .....	4,663
Visits to Public Conveniences .....	180
Visits to Common Lodging Houses .....	23

Number of—*continued*.

Visits re Rivers Pollution .....	11
Smoke Observations .....	10
Visits re Diseases of Animals Acts .....	114
Visits re Shops Act, 1950, Section 38 .....	4
Visits re Rag Flock Act, 1951 .....	2
Rag Flock Samples .....	12
Miscellaneous Visits .....	552
Interviews .....	238

**Particulars of Notices Served and Work Done.**

	Work to be done by arrangement.	Preliminary Notices served.	Warning letters sent.	Statutory Notices served.	Work completed by Owners.	Work done by Council in default.
Choked Drains, Soil Water .....	15	36	1	5	49	2
Choked Drains, Surface Water .....	4	15	—	—	19	—
Drains, re Reconstruction—						
Soil Water .....	4	15	—	—	19	—
Surface Water .....	—	4	—	1	2	—
Defective Soil Pipes .....	—	3	—	—	3	—
Defective Ventilation Shafts .....	—	4	—	—	4	—
Defective Manhole Covers .....	6	3	—	—	9	—
R.W.P's. requiring disconnecting .....	—	—	—	—	—	—
Closets converted to Water Carriage System .....	—	2	—	2	2	—
New W.C's. to be provided .....	—	1	—	—	1	—
Defective Pans and Traps of W.C's. .....	—	6	—	3	6	—
Defective W.C. Cisterns or Flush Pipes .....	1	20	—	3	20	—
Defective Waste Pipes (Baths, Lava- tory or Sinks) .....	1	3	—	1	4	—
Defective Sink Waste Channels .....	—	1	—	—	1	—
Absence of Sinks .....	—	4	—	1	4	—
Defective Sinks .....	—	2	—	—	3	—
Defective Pointing around Sinks .....	—	—	—	—	—	—
Defective Eavesgutters or Rain- water Pipes .....	21	74	—	10	90	1
Defective Cesspools or Cesspools to be Abolished .....	—	2	—	—	2	—
Defective House Gullies .....	—	7	—	—	7	—
Stagnant Water .....	—	1	—	—	1	—
Offensive Accumulations .....	—	7	—	—	5	2
Animals, Poultry, etc. ....	2	1	—	—	3	—
Verminous Rooms .....	40	—	—	—	—	40
Overcrowding .....	1	1	—	—	2	—
Insufficient or Defective Water Supply .....	5	8	—	1	13	—
Defective Dustbins .....	9	94	—	6	67	—
Absence of Dustbins .....	1	2	—	—	3	—

	Work to be done by arrangement.	Preliminary Notices served.	Warning letters sent.	Statutory Notices served	Work completed by Owners.	Work done by Council in default
Defective Yard Paving .....	2	6	—	—	8	—
Rooms requiring Decoration .....	1	18	—	2	17	—
W.C's. requiring Cleansing .....	—	1	—	—	1	—
Defective Chimney Flues .....	3	3	—	5	6	—
Damp Walls due to external defects	1	16	—	—	14	—
Damp Walls due to defective damp course .....	—	25	—	1	18	—
Defective Fireplaces or Stoves .....	1	23	—	2	22	—
Defective Coppers .....	—	—	—	1	1	—
Defective Ventilation .....	—	3	—	—	1	—
Defective Sub-Floor Ventilation .....	2	3	—	—	5	—
Defective Windows and Doors .....	—	58	—	4	56	—
Defective Roofs .....	1	131	—	9	127	1
Defective Brickwork or Pointing .....	—	48	—	—	33	—
Defective Floors .....	—	26	—	2	24	—
Defective Plastering .....	3	72	—	7	55	—
Defective Stairs .....	2	2	—	—	3	—
Absence of Handrails to Stairs .....	—	1	—	1	1	—
Defective Gas Services or Fittings	1	2	—	—	3	—
Absence of or Insufficient Accom- modation for Food Storage .....	—	2	—	1	1	—
Absence of Name and Address of Owner or M.O.H. from Rent Book or Permitted Number .....	—	1	—	—	1	—
Matters unscheduled .....	—	2	—	—	2	—

### Factories, Factories (N.M.P.) & Workplaces—

Unregistered .....	—	3	—	—	3	—
Overcrowded .....	—	—	—	—	—	—
Without Abstract or Blue Book .....	—	1	—	—	1	—
Absence of Thermometers in Work- rooms .....	—	—	—	—	—	—
Absence of Means of Heating in Workrooms .....	—	3	—	—	3	—
Absence of Suitable Washing Facili- ties in Workrooms .....	—	46	—	—	37	—
Absence of Facilities for taking Meals in Factories .....	—	—	—	—	—	—
Requiring Lime Washing or Cleansing .....	67	54	—	—	116	—
Requiring Drains or Drains Altering	7	3	—	—	8	—
Insufficient Ventilation .....	1	1	—	—	2	—
Insufficient Water Supply .....	1	—	—	—	1	—
Sanitary Accommodation—						
Insufficient .....	2	3	—	—	4	—
Unsuitable or Defective .....	4	22	—	—	24	—
Not Separate for Sexes .....	—	1	—	—	—	—



	Work to be done by arrangement.	Preliminary Notices served.	Warning letters sent.	Statutory Notices served.	Work completed by Owners.	Work done by Council in default.
Having Improper Accommodation for Storing Refuse .....	—	15	—	—	14	—
Offensive Accumulations .....	—	7	—	—	7	—
Illegal Occupation of Underground Bakehouses .....	—	—	—	—	—	—
Failing to Return Lists of Out- workers .....	—	—	—	—	—	—
Outwork in Unwholesome Premises .....	—	—	—	—	—	—
Outwork in Infected Premises .....	—	—	—	—	—	—
New W.C's. erected .....	1	—	—	—	1	—
Emissions of Smoke .....	—	2	—	—	2	—
General Dilapidations .....	—	25	—	—	22	—
Infestation by Rats and Mice .....	—	92	—	—	92	—
Contravention of—						
Milk and Dairies Regulations .....	—	1	—	—	1	—
Milk (Special Designation) Regulations .....	—	1	—	—	1	—
Food and Drugs Act, 1938, Section 13 .....	—	80	—	—	71	—
Food and Drugs Act, 1938, Other Matters .....	—	2	—	—	2	—
Byelaws relating to Handling and Wrapping of Food .....	—	39	—	—	31	—

## STATUTORY NOTICES.

### Number of Legal Notices issued for Abatement or Abolition of Nuisances.

	Served.	Complied With.
Statutory Notices outstanding 31/12/51 .....	42	42
Public Health Act, 1936, Section 39 .....	11	11
Public Health Act, 1936, Section 45 .....	4	4
Public Health Act, 1936, Section 47 .....	4	4
Public Health Act, 1936, Section 75 .....	12	11
Public Health Act, 1936, Section 93 .....	19	18
Housing Act, 1936, Section 6 .....	2	2
Housing Act, 1936, Section 9 .....	17	13
Guildford Corporation Act, 1926, Section 100 .....	5	5
Totals .....	116	110



## LEGAL PROCEEDINGS.

During the year, legal proceedings were instituted in the following cases:—

Date Case Heard.	Act.	Address of Premises.	Offence
1. 17/11/52.	Movement of Swine Order, 1950.	Guildford Cattle Market.	Movement of Swine without licence. Fined £2.
2. 1/9/52.	Foot-and-Mouth Disease Regulations.	Guildford Cattle Market.	Movement of calves without licences, two cases. Defendants fined £1 each.
3. 18/8/52.	Foot-and-Mouth Disease Regulations.	Guildford Cattle Market.	Movement of animals without licences, eleven cases. Defendants fined £1 each.
4. 7/7/52.	Public Health Act, 1936, Sections 39 and 45.	2, 3, 4, 6, 7, 8, 10 & 11, North Place, Guildford.	Failure to comply with notices requiring repairs, eight offences. Fined £1 in each case.
	Public Health Act, 1936, Section 93.	2, 3, 4, 6, 7, 8, 10 & 11, North Place, Guildford.	Failure to comply with notices requiring repairs, four offences. Nuisance Orders made to abate nuisances within 28 days. £10 14s. 0d. costs.
5. 17/3/52.	Public Health Act, 1936, Sections 39 and 45.	4, The Mount, Guildford.	Failure to comply with notices requiring repairs, three offences. Fined total of £11 and given two months in which to complete the work with daily penalty of £1 in default.

## DISINFECTIONS.

Steam disinfection of bedding, clothing, etc., is still carried out at the Council's disinfection plant, by arrangement, for the districts of Guildford Rural District Council, Hambledon Rural District Council, Godalming Borough Council, and Farnham Joint Hospital Board, in addition to the requirements of the Borough of Guildford. Bedding from harvest camps in the area is also steam disinfected by arrangement with the Ministry of Agriculture and Fisheries.

Number of rooms disinfected after infectious disease (within the Borough) .....	144
Number of rooms disinfected other than infectious disease .....	42
Number of cases where bedding, etc., was steam disinfected :—	
From premises within the Borough .....	121
From premises out of the Borough .....	16

### Articles Disinfected by Steam.

	Premises within the Borough. Private Houses.	Premises outside the Borough. Harvest Camps, etc.	Private Houses.	TOTAL.
Mattresses .....	144	—	34	178
Blankets .....	535	11,376	73	11,984
Pillows .....	350	—	71	421
Sundries .....	157	—	29	186
Totals .....	1,186	11,376	207	12,769

### DISINFESTATION OF PREMISES.

During the year 99 complaints of verminous premises were received. The following table shows the number of premises found to be infested and the reasons for disinfestation :—

Reasons for Disinfestation.	Number of Premises.	Number of Rooms.
Bugs .....	9	23
Fleas .....	5	16
Flies .....	1	1
Wasps .....	71	73
Ants .....	5	6
Wood Worm .....	2	2
Wool Grub .....	1	1
Lice .....	1	1
Others .....	4	9
Totals .....	99	132

In cases where families are moved to Council houses or requisitioned accommodation within the Borough, an inspection is made of all furniture and bedding to be removed, and of the premises to which the family is moving. Any infestations by vermin thus found are dealt with before removal takes place.

In a number of instances precautionary spraying with an insecticide containing D.D.T. is carried out where the standard of cleanliness is doubtful.

## RATS AND MICE DESTRUCTION.

### Prevention of Damage by Pests Act, 1949.

	Type of Property.				TOTAL
	Local Authority.	Dwelling Houses.	Agri-culture.	All other (including Business and Industrial).	
1. Total number of properties in Local Authority's District	316	12,554	31	1,662	14,563
2. Number of properties inspected by the Local Authority during 1952 as a result :—					
(a) Of notification	2	496	—	87	585
(b) Otherwise	1	306	13	589	909
3. Number of properties (under 2) found to be infested by rats :—					
Major	1	—	—	—	1
Minor	2	475	13	29	519
4. Number of properties (under 2) found to be seriously infested by mice	—	119	—	63	182
5. Number of infested properties (under 3 and 4) treated by the Local Authority	3	594	13	92	702
6. Number of notices served under Section 4 :—					
(1) Treatment—					
Formal	—	—	—	—	—
Informal	—	—	—	—	—
(2) Structural Works (i.e., Proofing)	—	4	—	1	5
Total	—	4	—	1	5
7. Number of cases in which default action was taken by Local Authority following issue of Notice under Section 4	all done by arrangement.				—
8. Legal Proceedings	—	—	—	—	—
9. Number of "block" control schemes carried out	—	—	—	—	191

### Summary of Visits to Premises by Rodent Operators.

	Business Premises.	Dwelling Houses.	TOTAL.
First Visits	83	638	721
Subsequent Visits	1,973	2,690	4,663



Three whole-time operators were employed until 30th September, 1952, when this number was reduced to two.

The majority of new infestations reported were of a minor character, and treatments carried out by methods laid down by the Ministry of Agriculture and Fisheries (Infestation Control Division) were highly successful.

**Systematic Treatment of Sewers.** During the period 19th to 22nd May, 1952, ten per cent. of the Council's sewer manholes were test baited, and from 27th to 30th October, 1952, a maintenance treatment was carried out. In the few cases where infestations were found, the degree of infestation was of a minor character. Approval has now been obtained to treat sewers in conjunction with block controls and to restrict maintenance sewer treatments to the centre of the town.

**Banks of the River Wey.** Treatment is also carried out periodically along the banks of the River Wey which lie within the Borough. All holes are treated with cyanide gas and are afterwards filled up. No serious infestation of premises adjacent to the river banks was found during the year.

**"Warfarin."** During the year, the use of "Warfarin" as a poison, with a bait base of sausage rusk, has been continued and excellent results have been achieved. This poison has several advantages over those employed to date, i.e., it can be used without the pre-baiting system employed with other poisons, thereby cutting down the number of visits per case; it is relatively harmless to domestic pets and young children, and the rodents do not acquire any "poison prejudice." One drawback to its use is that it is cumulative in effect, and is slower in action, the first "kill" being recorded approximately one week after commencement of treatment. In large food premises, such a delay may allow excessive damage to stocks during the "waiting" period, and this problem has been solved by the initial use of arsenic or zinc phosphide followed by the normal treatment with "Warfarin."

## FACTORIES ACT, 1937.

### FACTORIES, FACTORIES (NO MECHANICAL POWER) AND WORKPLACES.

#### 1. Inspections for purposes of provisions as to Health made by Sanitary Inspectors.

	Number on Register.	Number of Inspections.	Number of Written Notices.	Number of Occupiers Prosecuted.
(1) Factories in which Notices 1, 2, 3, 4 and 6 are to be enforced by Local Authorities .....	48	120	1	—
(2) Factories not included in (1) to which Section 7 applies :—				
(a) Subject to the Local Authorities (Transfer of Enforcement) Order, 1938 .....	212	661	23	—
(b) Others .....	—	—	—	—
(3) Other premises under the Act (excluding outworkers' premises) .....	26	216	3	—
Totals .....	286	997	27	—

#### 2. Cases in which defects were found.

Number of cases in which defects were found :—

	Found.	Remedied.	Referred to H.M. Inspector.	Referred by H.M. Inspector.
Want of Cleanliness .....	121	116	—	2
Overcrowding .....	—	—	—	—
Unreasonable Temperature .....	3	3	—	—
Inadequate Ventilation .....	2	2	—	1
Ineffective Drainage of Floors	10	8	—	—
Sanitary Conveniences :—				
(a) Insufficient .....	5	4	—	1
(b) Unsuitable or defective	26	24	—	4
(c) Not separate for sexes	1	—	—	—
Other offences (not including offences relating to home-work) .....	—	—	—	—
Totals .....	168	157	—	8

No prosecutions were instituted.

# INSPECTION AND SUPERVISION OF FOOD.

## MILK SUPPLY.

### Milk and Dairies Regulations, 1949.

Premises  
on Register  
Dec., 31st, 1952.

#### MILK PURVEYORS WITHIN THE BOROUGH—

Number of Cowkeepers Registered with Ministry of Agriculture and Fisheries .....	10
Number of Local Producers of:—	
Tuberculin Tested Milk .....	6
Accredited Milk .....	1
Ungraded Milk .....	3
Number of Producer-Retailers .....	3
Number of Producer-Wholesalers .....	7
Number of Wholesaler-Retailers .....	2

### Milk (Special Designations) Act, 1949.

The following is a summary of designated milk licences granted in 1952:—

#### RAW MILK—

##### Tuberculin Tested Milk (Farm Bottled)—

Supplementary Licence .....	1
Dealers' Licences .....	3

#### HEAT TREATED MILK—

##### Tuberculin Tested Pasteurised and Pasteurised Milk—

Pasteurisers' Licences .....	2
Dealers' Licences .....	8
Supplementary Licence .....	1

#### STERILISED MILK—

Supplementary Licence .....	1
Dealers' Licences .....	9



# Bacteriological Examination of Milk—Analysis of Results, 1952.

Type of Milk.	B. Coli in				Methylene Blue R.T.			Phosphatase Test.			Tubercle Bacillus.			Turbidity Test.	
	Percentage Positive.				Number of Samples Submitted.			Number of Samples Submitted.			Number of Samples Submitted.			Number of Samples Submitted.	
	1	1	1	1	10	100	1000	Passed.	Failed.	Percentage Passed.	Passed.	Failed.	Percentage Passed.	Number of Samples Submitted.	Percentage Positive.
Non-designated	6	2	—	—	2	2	—	100.00	—	—	—	—	—	6	—
Pasteurised	138	—	—	—	133	133	—	100.00	133	100	—	—	—	5	—
Tuberculin Tested (Pasteurised)	101	—	—	—	96	96	—	100.00	96	100	—	—	—	5	—
Tuberculin Tested (Farm Bottled)	19	15	—	5	15	14	1	93.33	—	—	—	—	—	4	—
Tuberculin Tested	8	4	—	1	5	5	—	100.00	—	—	—	—	—	3	—
Sterilised	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL	275	21	—	6	251	250	1	99.60	229	100	229	—	23	3	3

## Bacteriological Examination of Churn and Other Rinses.

In conjunction with the investigation of unsatisfactory bacteriological samples of milk and the routine inspection of dairies, 49 churn and bottle rinses were taken for bacteriological examination with results as shown hereunder :—

				Bacteria Count per Vessel.			
				Rinses Submitted.	Less than 50,000.	50,000 to 250,000.	250,000 and over.
Churns	.....	.....	.....	31	22	8	1
					Less than 600.	600 to 2,000.	Over 2,000.
Bottles	.....	.....	.....	18	16	2	—
Totals				49	38	10	1

In all cases where bacterial counts of over 50,000 and 2,000 were obtained for churns and bottles respectively, methods of sterilisation of utensils were investigated and repeat samples taken.

The interpretation of results of churn rinses is in accordance with that adopted by the Ministry of Agriculture and Fisheries National Milk Testing and Advisory Scheme.

## MANUFACTURE AND SALE OF ICE CREAM.

During the year the manufacture and sale of ice cream was continued on an increasing scale.

There are now two registered manufacturers of ice cream in the Borough and 141 retailers. The manufactories are housed in specially constructed premises, and the conditions under which the ice cream is manufactured are satisfactory.

Retailers of ice cream from local shop premises have also made satisfactory provisions in accordance with the Ice Cream (Heat Treatment) Regulations, 1947, and any unsatisfactory conditions found have been remedied.

Ice Cream premises were kept under close supervision during the year, 177 inspections being made and 111 samples taken for bacteriological examination.

The following table shows the result of the bacteriological examination of ice cream samples :—

Methylene Blue Test (number of samples submitted, 111)—

Grade I. (4½ hrs. +)	Grade II. (2½—4 hrs.)	Grade III. (½—2 hrs.)	Grade IV. (0—½ hr.)
89	15	6	1
(80.18%)	(13.51%)	(5.41%)	(0.90%)

Bacillus Coli (number of samples submitted, 111)—

Absent.	Present in 1/10th ml.
66	45
(59.46%)	(40.54%)
	(Faecal coli present in 5 samples)

The above results show a further improvement on the previous year's figures with regard to the Methylene Blue Test, 93.69% of the samples submitted in 1952 falling within Provisional Grades I and II, as compared with 90.22% in 1951. 40.54% of the samples in 1952 were, however, reported to contain B. Coli. as against 31.29% in the previous year. The presence of faecal coli in 5 samples all related to the same source of manufacture outside the Borough and the matter was reported to the local authority concerned.

"Ice Lollies" were also manufactured in increasing number and 11 samples submitted for bacteriological examination were reported to be satisfactory.

## BACTERIOLOGICAL EXAMINATION OF OTHER FOODS.

During the year, 13 samples of "other foods," principally foodstuffs used in connection with the flour confectionery trade, were taken for bacteriological examination, with the following results :—



## Bacteriological Report.

Number of Samples submitted.	Description of Food.	B. Coli (non-faecal).	Faecal coli.	Pathogenic Organisms.	Non-Pathogenic. Organisms.	Sterile.	Remarks.
6	Synthetic Cream	2	—	1*	1	2	*Moderate growth of Strep-faecalis and Bact. aerogenes.
2	Goats Cream .....	2	—	1*	—	—	*Moderate growth of enterococci.
3	Cream Meringue	1	—	1	1	2	—
1	Cream Horn .....	1	—	—	—	—	—
1	Cream Butter .....	—	—	—	1*	—	*Scanty growth of sporing aerobes (non-pathogenic).
13		6	—	3	3	4	

These samples were taken as an experiment to test the bacteriological condition of commodities which are frequently to be seen lying about unprotected in bakers' and confectioners' premises.

In cases where unsatisfactory reports were obtained, follow-up advice was given concerning the proper storage and handling of these commodities. In the absence of definite bacteriological standards, one has to depend entirely on educational activities to bring about the desired improvement.

There is a great need for the provision of more refrigerators in bakehouses for the storage of susceptible foodstuffs. Unfortunately a large number of bakers do not appear to appreciate the importance of this provision.

## SANITARY CONDITION OF PUBLIC HOUSES AND OTHER LICENSED PREMISES.

During the year, 31 inspections were made concerning the sanitary condition of licensed premises in the Borough.

The improvement noted in recent years in connection with the sanitary condition of these premises was maintained. All licensed premises within the Borough are now adequately provided with facilities for washing of glasses, etc., and sanitary accommodation for customers.

## **GUILDFORD EXPERIMENTAL SLAUGHTERHOUSE.**

This building, which was the first post war experimental slaughterhouse to be erected by the Ministry of Food, was brought into use on the 31st March, 1952. During the first few months, many of the anticipated snags and difficulties were eliminated, and a satisfactory routine in both slaughtering and meat inspection was established.

A high degree of efficiency has now been attained by the slaughtering staff resulting in an average hourly kill of :—

15 to 18 cattle or 50 to 80 sheep; or  
25 to 30 pigs or 40 to 50 calves.

This output can be maintained over the whole slaughtering period of the day, which normally commences at 6 a.m. and finishes approximately at 4.30 p.m.

The excessive overtime experienced during the first few months due, inter alia, to inexperience with equipment, etc., has now been considerably reduced. Meat inspection is commenced at 7 a.m. by the Senior Meat Inspector who completes his period of duty at 2.45 p.m.

When circumstances warrant assistance, this is given by one of the District Sanitary Inspectors, who also takes over from the Senior Meat Inspector at 2.45 p.m., and completes the inspections of the day. This procedure has, up to the present, proved to be satisfactory in regard to the meat inspection service.

It is now clearly seen that many of the criticisms offered before construction began were justified. The most important of these criticisms include insufficiency of drainage to the gut room, fat room and lairages, and insufficient size of the

detention bay, where so much of the meat inspector's work is done. The plaster and painted surfaces of the walls have not resisted satisfactorily the heavy wear and tear, and there is no doubt that glazed bricks would have been much better.

Sterilising facilities for knives and other equipment will be improved in the very near future, and at the present time contaminated knives, etc., are immersed in a Chlorocresol solution.

Laboratory facilities are not provided on the premises, but experience has shown that such provision is not really necessary having regard to the proximity of other laboratory services. A new and up-to-date Public Health laboratory will be opened in Guildford in the near future.

A good standard of cleanliness is now maintained during slaughtering, and the use of wiping cloths on dressed carcasses has been eliminated by the installation of a hot water spray for the washing process. From a hygienic point of view, the spraying of carcasses with water at 170/180°F. instead of wiping with cloths which are frequently contaminated, is a great step forward. The use of a hot water spray on dressed carcasses is a great innovation and, to date, there have been no complaints from the trade concerning the condition of the meat on arrival at the butcher's shop.

The plastic clothing worn during the first few months proved unsatisfactory and the slaughtermen now wear blue boiler suits and rubber aprons.

The efforts being made to produce clean meat emphasise the necessity for better types of vehicles for transport to the butcher, and these are gradually being introduced. The number of complaints received concerning meat transport has been reduced during the past year.

The efficiency of the "line dressing" system is proved by the production figures already given which show an increase of 71.08% on last year's figures. The rate of production, although satisfactory from the designers' point of view, creates certain meat inspection difficulties, and requires the meat inspector's presence at all times, otherwise a "build-up" of carcasses and offals awaiting inspection is quickly created, resulting in a general hold-up of slaughtering.



A high standard of meat inspection is maintained in accordance with Memo 3/Meat although certain requirements relating to the routine inspection of feet, lips, nasal cavities, etc., have been found to be impracticable.

The system of numbering carcasses and offals ensures as far as is possible the identification of offals with corresponding carcasses. Casualty animals continue to be a great problem, but the provision of certificates accompanying dressed and undressed carcasses has proved invaluable to the Meat Inspector. Fortunately, the several cases of suspected anthrax experienced during this period all proved negative.

The quality of carcasses produced during the year under review has been excellent, and this has, to a great extent, assisted the Meat Inspectors in keeping up with the speed of production. This quality is also shown by the low percentage of carcasses totally condemned. A Meat Marking Scheme is at present before the Ministry of Food for approval, but is held in abeyance pending investigation into the need for further assistance to put the scheme into operation.

A prosecution taken under the Slaughter of Animals Act, 1933, against a slaughterman for shooting sheep in front of other live ones, has emphasised to the slaughtering staff that rigid compliance with existing legislation will be enforced, and generally, there has been ready co-operation from all concerned.

In assessing the value of the new experimental slaughterhouse, it is well to remember the former insanitary premises in which meat was produced in Guildford. The better conditions under which slaughtering and meat inspection are now carried out, result in a much higher standard of protection to the meat consumer.

All things considered, the new slaughterhouse has been an excellent step forward, and the experience during the erection and running of the Guildford Slaughterhouse will be useful to those concerned with the construction and conduct of future slaughterhouses.

## INSPECTION OF SLAUGHTERHOUSES.

The following table shows the number of carcasses inspected and condemned during the year at the Guildford Experimental Slaughterhouse :—

	Cattle exc. Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.	TOTAL.
Number killed .....	9,206	1,614	2,169	16,030	6,202	35,221
Number inspected .....	9,206	1,614	2,169	16,030	6,202	35,221
<b>All Diseases except Tuberculosis.</b>						
Whole carcasses condemned	7	7	16	17	66	113
Carcasses of which some part or organ was condemned .....	3,245	626	9	1,512	958	6,350
Percentage of number inspected affected with disease other than Tuberculosis .....	35.32	39.21	1.15	9.53	16.51	18.34
<b>Tuberculosis only.</b>						
Whole carcasses condemned	15	31	3	—	8	57
Carcasses of which some part or organ was condemned .....	879	500	2	—	187	1,568
Percentage of number inspected affected with Tuberculosis .....	9.71	32.89	.23	—	3.14	4.61

### Slaughter of Animals Act, 1933.

The number of slaughtermen on the register on 31st December, 1952, was 30.

## INSPECTION OF MEAT AND OTHER FOODS.

Summary of articles of food condemned during the year :—

Article.	Number of Articles (Tins, Packets, etc.).	Weight in lbs.
Beef .....	—	160,936
Mutton .....	—	3,987
Pork .....	—	18,502
Veal .....	—	1,009
Butter .....	2	9
Cheese .....	81	74
Cake .....	33	4
Eggs (Dried) .....	1	12

Article.	Number of Articles (Tins, Packets, etc.).	Weight in lbs.
Fish .....	1,201	1,452
Fruit Juices .....	207	181
Fruit .....	2,492	3,319
Jams, Marmalades, etc. ....	277	352
Milk (Evaporated) .....	170	171
Meat (Tinned) .....	864	2,267
Paste .....	23	32
Poultry and Game .....	30	201
Sauce .....	6	2
Sausages .....	15	140
Soup .....	90	75
Sweets .....	21	126
Vegetables .....	1,198	1,011
Cereal and Flour .....	84	137
Pudding .....	11	11
Biscuits .....	5	10
Milk .....	162	178
Miscellaneous .....	49	40
	<hr/> 6,972	<hr/> 194,238

### Total Weight:

194,238 lbs., or 86 tons, 14 cwts., 1 qr., 2 lbs.

## FOOD AND DRUGS ACT, 1938.

From information supplied by the Chief Inspector of Weights and Measures Department, who is also the Sampling Officer appointed under the Food and Drugs Act, 1938, the following samples of food and drugs were taken during the year:—

Nature of Sample.	Number Taken.	Genuine.	Not Genuine	Remarks
Ale, Light and Bass	2	2	—	
Arrowroot .....	1	1	—	
Aspirin Tablets .....	1	1	—	
Baking Powder .....	2	1	1	Caution.
Barley Flour .....	1	1	—	
Battercrisp .....	1	1	—	
Bicarbonate of Soda	1	1	—	
Bisto .....	1	1	—	
Blancmange Powder	1	1	—	
Brawn .....	1	1	—	
Broth, Scotch .....	1	1	—	
Carried forward .....	<hr/> 13	<hr/> 12	<hr/> 1	



Nature of Sample.	Number Taken.	Genuine.	Not Genuine	Remarks.
Brought forward .....	13	12	1	
Butter .....	2	1	1	Margarine issued for butter at Hospital. Matter dealt with by Hospital authorities.
	(including 1 informal)			
Butter, Peanut .....	1	1	—	
Cakeoma .....	1	1	—	
Chico .....	1	1	—	
Chocolate, Drinking .....	1	1	—	
Chutney .....	1	1	—	
Cocoa .....	2	2	—	
Coconut, Dessicated .....	1	1	—	
Coffee, Ground .....	1	1	—	
Coffee and Chicory .....	1	1	—	
Condensed Milk .....	2	2	—	
Cornflour .....	1	1	—	
Dessert Powder .....	1	1	—	
Dextrosol .....	1	1	—	
Epsom Salts .....	2	2	—	
Festival Mixture .....	1	1	—	
Frizets .....	1	1	—	
Gelatine .....	1	1	—	
Gin .....	3	3	—	
Glauber Salts .....	2	1	1	Appropriate action taken.
Gravy Improver .....	1	1	—	
Jellies .....	4	4	—	
Kingsway Assortment .....	1	1	—	
Kruschen Salts .....	1	1	—	
Lemonade Powder .....	1	1	—	
Lemco .....	1	1	—	
Liquorice Powder .....	1	1	—	
Luncheon Meat .....	1	1	—	
Lystone Salts .....	1	1	—	
Milk .....	55	51	4	(1) Formal—7% defi- cient in Fat, 1% deficient in S.N.F. (2) A.T.C.—slightly de- ficient in S.N.F. No action. (3) Formal—8% defi- cient in Fat, 1% deficient in S.N.F. (4) A.T.C.—slightly de- ficient in Fat. No action. (2nd A.T.C. sample taken same time was genuine.)
	(including 3 informal & 3 “appeal-to-cow”)			
Milo .....	1	1	—	
Mustard Mixture .....	2	2	—	
Carried forward .....	110	103	7	

Nature of Sample.	Number Taken.	Genuine.	Not Genuine	Remarks.
Brought forward .....	110	103	7	
Nutmeg, Ground .....	1	—	1	Appropriate action taken.
Paste, Fish and Meat	2	2	—	
Pastry Mixture .....	1	1	—	
Pea Flour .....	1	1	—	
Peel, Mixed .....	1	1	—	
Pepper, White and flavoured com- pound .....	2	2	—	
Quoffy .....	1	1	—	
Raspberries, tinned	1	1	—	
Ready Mix .....	1	1	—	
Roll, Jam and Choco- late .....	2	2	—	
Sagion .....	1	1	—	
Sauces .....	5	5	—	
Sausage, Beef .....	1	1	—	
Sausage Meat, Pork	1	1	—	
Sausage, Pork .....	3	3	—	
	(including 1 informal)			
Semolina .....	1	1	—	
Soups .....	2	2	—	
Spaghetti in Tomato	1	1	—	
Sponge Mixture .....	1	1	—	
Suet, Shredded Beef	2	2	—	
Tapioca Flakes .....	1	1	—	
Turmeric Powder .....	1	1	—	
Vegetables, Mixed .....	1	1	—	
Vinegar, Malt .....	3	3	—	
Whisky, Scotch .....	3	3	—	
Totals .....	150	142	8	

## HOUSING.

The Housing problem is still a serious one, despite the valiant efforts of the Housing Committee to provide satisfactory housing for the needy families of Guildford.

On 31st December, 1952, there was a waiting list of 4,061 applicants, and a further 508 applications have been received since, although 233 Council houses and flats and 83 privately owned houses were erected during the year.

In these circumstances it is impossible to make real progress with the abolition of unfit houses. During the year the Housing Committee made an allocation of 12 houses per

year for the re-housing of displaced persons from unfit properties, but the first year's allocation has mainly been taken up in re-housing families from premises already condemned. It is obvious that this allocation, although a step in the right direction, is quite inadequate to allow for any serious action to be taken under the Housing Act, 1936. Meanwhile, many of these sub-standard properties are becoming more and more unfit for habitation, and there is no justification for requiring owners to spend money on anything except the most urgent repairs. It is hoped that the allocation of houses for slum clearance purposes will be considerably increased in the near future, although there are 198 huts on the Merrow Woods, Merrow Downs and Woking Road sites which are still occupied and which are considerably below modern standards of housing. If these are to be abolished before serious work can be commenced on slum clearance, it will be some considerable time before any active programme can be put into operation.

During the year two Demolition Orders were made, four houses closed on undertakings from owners not to re-let for habitation, and two parts of houses were the subject of Closing Orders made under Section 12 of the Housing Act, 1936.

There were no applications for financial assistance under the Housing Act, 1949, in connection with the improvement of existing dwellings. Several preliminary enquiries have been received but the applications have been withdrawn owing to the number of conditions attached to the granting of assistance. Such preliminary enquiries as have been received have been from persons seeking to improve properties for their own occupation. Landlords do not appear to be interested in the improvement of houses let to occupiers under the present terms and conditions of the Housing Act, 1949.

A survey of housing conditions in the Borough has been commenced with a view to obtaining more exact information about the number of properties to be dealt with under slum clearance programmes, and the number to be reconditioned which have fallen into a state of disrepair. It is hoped to complete the survey during 1953, which should enable the proper degree of priority to be given to most urgent cases.



## HOUSING STATISTICS.

### 1.—Inspection of Dwelling Houses during the Year.

1. (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) .....	1,520
(b) Number of inspections made for the purpose .....	3,376
2. (a) Number of dwelling houses (included under sub-head 1 above) which were inspected and recorded under the Housing Acts .....	334
(b) Number of inspections made for that purpose .....	602
3. Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .....	12
4. Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .....	285

### 2.—Remedy of Defects during the Year without Service of Formal Notices.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers .....	289
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### 3.—Action under Statutory Powers during the Year.

#### A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936—

1. Number of dwelling houses in respect of which Notices were served requiring repairs .....	19
2. Number of dwelling houses which were rendered fit after service of formal Notices—	
(a) By Owners .....	31
(b) By Local Authority in default of Owners .....	—

#### B.—Proceedings under Public Health Acts—

1. Number of dwelling houses in respect of which Notices were served requiring defects to be remedied .....	55
2. Number of dwelling houses in which defects were remedied after service of formal Notices—	
(a) By Owners .....	79
(b) By Local Authority in default of Owners .....	1

**C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936—**

1. Number of dwelling houses in respect of which Demolition Orders were made .....	2
2. Number of dwelling houses demolished in pursuance of Demolition Orders .....	—
3. Number of dwelling houses closed on undertaking from Owners not to re-let for habitation .....	4
4. Number of Unfit dwelling houses rendered fit—undertakings cancelled .....	—

**D.—Proceedings under Section 12 of the Housing Act, 1936—**

1. Number of separate tenements or underground rooms in respect of which Closing Orders were made .....	2
2. Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .....	1

**E.—Action taken under Ministry of Health Circular 2156—**

1. Number of houses licensed for temporary occupation	4
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# GUILDFORD HYGIENIC FOOD TRADERS' GUILD.

## Annual Report for the Year Ending 28th February, 1953.

### MEMBERS OF THE ADVISORY COMMITTEE.

**Chairman:** COUNCILLOR R. F. SPARROW.

### Members of the Council:

HIS WORSHIP THE MAYOR  
(ex officio).

COUNCILLOR E. JONES  
(Vice-Chairman).

COUNCILLOR W. HAINES.

COUNCILLOR G. L. SHAW.

### TRADE REPRESENTATIVES.

Mr. W. AYERS .....	Union of Shop, Distributive and Allied Workers. (Resigned 7th November, 1952.)
Mr. B. W. AUSTIN .....	Butchers.
Mr. S. W. CHRISTOPHER .....	Fried Fish Dealers and Wet Fish Dealers.
Mr. A. CROSS .....	Guildford Co-operative Soc., Ltd.
Mr. A. GODDARD .....	Grocers and General Provisions Stores.
Mr. N. GOODEVE .....	Sweets and Confectionery—Manufacturers and Distributors.
Miss L. HIGGINSON .....	School Meals Service.
Mr. J. JONES .....	Multiple Traders.
Mr. G. JORDISON .....	Union of Shop, Distributive and Allied Workers.
Mr. G. LANGHORN .....	Market Traders. Retail Fruit Federation.
Mr. T. OHLER .....	Ice Cream—Manufacturers and Distributors.
Mr. E. F. STAMMERS .....	Dairymen.
Miss E. BENNETT .....	Factory Canteen Service.
Miss M. THORNE .....	Hotels, Cafes and Restaurants, etc.
Mr. R. L. WAUGH .....	Fruiterers and Greengrocers.

**Hon. Secretary:** Mr. H. A. PERRY.

### PUBLICITY, EDUCATION AND SOCIALS SUB-COMMITTEE.

**Chairman and Hon. Treasurer:** Mr. R. L. WAUGH.

COUNCILLOR W. HAINES.  
COUNCILLOR G. L. SHAW.  
COUNCILLOR R. F. SPARROW.  
Mr. A. CROSS.

Mr. A. GODDARD.  
Miss L. HIGGINSON.  
Miss M. THORNE.  
Mrs. E. REAVELL  
(co-opted member).



## GUILDFORD HYGIENIC FOOD TRADERS' GUILD.

To:—The Mayor, Aldermen and Councillors of the Borough of Guildford, and Members of the Guildford Hygienic Food Traders' Guild.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present the Fifth Annual Report of the Guildford Hygienic Food Traders' Guild for the year ending 28th February, 1953, during which time I have again had the privilege of being your Chairman.

The position with regard to membership shows a small increase, the total membership being 185 trader members and 1,066 employee members.

Throughout the year, regular visits have been made to all food premises in the Borough and, generally speaking, excellent standards of hygiene are being maintained, particularly amongst our members. In a few instances it has been necessary to require Guild members to improve existing conditions, but in these cases the necessary work has been done without delay.

We are again able to report a clean bill of health in the Borough so far as outbreaks of food infections are concerned, and whilst there is no room for complacency, we can confidently feel that the efforts of the Guild during the past six years have borne good fruit.

My Committee is anxious to encourage all members of the food trades to take advantage of the facilities afforded for basic instruction in hygienic preparation and handling of food, and I would appeal to all employers to see that their staffs attend the short courses of instruction which are arranged from time to time. Certificates of attendance are granted to those who complete the course, and I hope, in the not too far distant future, that employers will require all new employees to produce evidence of training in hygiene or to undertake instruction immediately on entering the trade.

I would again express the hope that the few food trades organisations who have hitherto not supported our efforts will do so during the coming year. It is difficult to understand why any trade organisation should fail in this respect if its members have the health and well being of the community at heart.

I would again express my thanks to the Council and to all members of the Guild for their continued support. Also to members and officers of the Advisory Committee for their willing co-operation.

(signed) R. F. SPARROW,

Chairman of the Advisory Committee of  
the Guildford Hygienic Food Traders'  
Guild.

## FIFTH ANNUAL REPORT

ON THE

Work of the Guild for the Year ending 28th February, 1953.

### Introduction.

The Guildford Hygienic Food Traders' Guild has now completed its first five years of work through the continued support of the Guildford Borough Council and members of the Guild. I am pleased to report continued progress both in membership and in the achievement of our aims. It is pleasing to note that no confirmed cases of food borne infections occurred during the year.

Advisory Committee meetings have been held regularly on the first Fridays of alternate months, and, although attendances have not always been good, much valuable work has been accomplished. The Publicity, Education and Socials Sub-Committee under its Chairman, Mr. R. L. Waugh, has met as and when required.

### Membership.

The following table shows the position with regard to membership at the last meeting of the Advisory Committee, held on the 2nd January, 1953 :—

	Number of Premises to which Guild applies.	Number of Trader Members Accepted.	Number of Employee Members Accepted.
Ice Cream Manufacturers and Distributors	4	4	12
Dairies .....	3	3	54
Bakehouses and Flour Confectioners .....	15	5	23
Catering Establishments (including Factory and School Canteens) .....	82	56	504
Grocers .....	73	46	199
Butchers and Cooked Meat Manufacturers	24	17	37
Fishmongers and Fishfryers .....	18	8	9
Greengrocers .....	34	10	23
General Stores, Confectioners and Mixed Trades .....	64	35	205
Totals .....	317	184	1,066



The increase in membership this year has been slight in comparison with previous years, being three trader members and 24 employee members. Standards of hygiene have been well maintained, however, and annual reports on trader members' premises have been favourable towards continued membership. The work required to maintain members' premises at a satisfactory level has been of a minor character, and has received prompt attention. Employee members have faithfully carried out their obligations to the Guild, but so much depends upon the degree of conscientious effort on the part of each individual. The employee is vitally important to the success or otherwise of our efforts, and the value of all the extensive alterations and improvements which have been effected at food premises generally can be largely nullified if employees fail to do their part. I am confident that our members are fully aware of their responsibilities in this direction.

From information supplied by the Central Public Health Laboratories, Colindale, it would appear that the number of outbreaks of food poisoning in this country is now slightly on the wane, but there is no room for complacency. The following comparative figures of outbreaks occurring in the period 1939-1950 illustrate the alarming way in which food infections have increased since the war. The decrease in 1951 is, we hope, the result of improved standards of hygiene which have been effected generally throughout the country. To reduce the number of outbreaks still further, to pre-war level, means continued effort on the part of everyone concerned with food preparation and handling. It is essential, therefore, that the work of the Guild must be maintained.

### **Summary of Outbreaks of Food Poisoning during the Years 1939 - 1950.**

1939	.....	83	1945	.....	433
1940	.....	47	1946	.....	685
1941	.....	119	1947	.....	847
1942	.....	73	1948	.....	804
1943	.....	224	1949	.....	2,431
1944	.....	291	1950	.....	3,979
			1951	.....	3,347

We are pleased to welcome the representative of the newly-formed Branch of the Caterers' Association of Great Britain on the Advisory Committee. The active support—and representation—of all food trades organisations is essential to the complete success of our own organisation, and it is difficult to understand why such support is withheld in certain cases.

### **Annual Reports on Trader Members' Premises.**

In accordance with Rule 14 of the "conditions Relating to Membership and Administration," annual reports on trader members' premises were submitted to the Advisory Committee in respect of 171 trader members. In 145 instances the premises had been maintained in an entirely satisfactory condition. In 23 instances continuation of membership was approved subject to minor improvements, and in 3 instances warning letters were sent where trades had failed to maintain satisfactory hygienic standards. In the latter cases all necessary works were promptly carried out.

### **Employee Members.**

It will be seen from the summary of membership that there are now 1,066 employee members. As from July, 1952, all applicants for employee membership are required to attend a course of lectures and to be in possession of a certificate of attendance before they are admitted to membership. This may result in a reduction of new applications, but it will ensure that future employee members will have at least received the basic instruction necessary for them to carry out their obligations to the Guild.

### **Educational Activities.**

A start has been made to implement the Advisory Committee's aim to provide a course of lectures for all food handlers. A syllabus of three lectures has been prepared, covering the following subjects:—

1. Food infections—how they are caused—how they are spread—how they are controlled,

2. Law relating to food hygiene—(a) premises; (b) personnel.
3. The practical application of hygienic standards in the preparation, handling and distribution of food.

Three courses of lectures were recently held at which 50 persons enrolled. Thirty-five employees attended the full course, and were awarded certificates of attendance, three attended two lectures and twelve attended one lecture only. Further efforts to organise similar courses have met with a poor response, and employer members are earnestly requested to encourage **all** employees to undertake this course of instruction. Lectures will be held at times most convenient to the trades concerned, but obviously this work cannot go on unless sufficient support is forthcoming.

### **Schools.**

Chiefly, because of the pressure of work in other directions, the proposed talks to school leavers have not yet been commenced. It is hoped to make suitable arrangements with the Education Authority during the coming year.

### **Organised Visits to Food Factories, etc.**

This is still the most popular form of educational activity because of its social nature. An active programme of visits has been arranged during the current year, which are well supported and appreciated.

### **Premises—Repairs and Improvements.**

A summary of work and improvements carried out in food premises in the Borough during the year ended 31st December, 1952, is attached hereto. From this summary it will be seen that extensive alterations and improvements have been carried out in a further 14 premises, bringing the total since the scheme commenced to 100 or 31.5% of the total food premises in the Borough. The first of the fishmongers premises to be reconstructed and provided with a closed front has been completed. This has resulted in a greatly improved appearance of the premises and an attractive and hygienic display of the commodities offered for sale. It is hoped that other fishmongers will soon follow this example.



## Bacteriological Examination of Foods Liable to Contamination During Preparation and Handling.

During the period under review, 15 samples of baker's commodities which are frequently associated with food infections were submitted for bacteriological examination. Of these, 13 were found to be either sterile or containing organisms of no pathogenic significance. The remaining two samples contained organisms of faecal origin which indicated unsatisfactory methods of preparation, storage and/or handling.

The types of foods or ingredients submitted for examination were as follows :—

					No. of Samples.	Result of Examination.	
						Satisfactory.	Unsatisfactory
Butter Cream	.....	.....	.....	.....	2	2	—
Synthetic Cream	.....	.....	.....	.....	9	8	1
Meringue	.....	.....	.....	.....	1	1	—
Cream Horn	.....	.....	.....	.....	1	1	—
Goats Cream	.....	.....	.....	.....	2	1	1

These results are very satisfactory, but extreme care is necessary at all times in the storage and handling of these products. Many recent outbreaks of food poisoning have been due to these types of commodities, which, of course, are included in the list of susceptible foods requiring particular care in handling. I would again stress the need for the provision of cold storage accommodation in bakehouses for ingredients liable to contamination.

## Bacteriological Examination of Washed Crockery, Utensils, etc.

Further advisory work has been carried out with regard to the washing and sterilisation of crockery, etc., in the catering trade. Forty series of swabs were taken during the year, which may be summarised as follows :—

Very Good	.....	13
Good	.....	9
Fair	.....	13
Bad	.....	5

This is an improvement on reports of previous years, but the aim is to achieve a bacterial count of 100 per utensil or less, with an absence of B. Coli and other pathogenic organisms. From experience it is found that suitable chemical detergents and sterilants are only used intermittently, probably due to cost, but the use of these substances is essential where it is not possible to provide abundant supplies of hot water, not less than 150°F. for washing and 170°F. for rinsing processes.

### **Social Activities.**

Social activities have again been restricted to the Annual Dinner and Dance held in March each year, and the outing for employees. The fourth Annual Dinner, held in March, 1952, was a great success, as usual, and was well attended. These functions have become a regular feature of the winter programme of social activities in the town.

A party of 132 members and friends visited the Ice Pantomime at the Empress Hall in January, 1953. These outings are very popular indeed.

The importance of a certain amount of social activity amongst members of the Guild cannot be over emphasised.

### **Conclusion.**

The work of the Guild has become an essential part of the public health services of Guildford, and members should appreciate that much of its activities takes the place of formal legislative action which would otherwise be necessary. Members of the food trades are undoubtedly more hygiene conscious than they were six years ago, but there is still much to be done, and the standards already achieved must be maintained. Loss of interest in the work, and consequent relaxation of effort, can only result in the return to former unsatisfactory standards which led to increased illness and disease amongst members of the public.

Once again our sincere thanks are due to the Members of the Guildford Borough Council, particularly to the Chairman and Members of the Advisory Committee of the Guild and the Medical Officer of Health and staff of the Health Department for their continued support and interest.

H. A. PERRY,  
Hon. Secretary.

Particulars of Work to be done.

	Dairies.	Ice Cream Manufacturers and Retailers.	Catering Establishments	Bakehouses.	Butchers and Cooked Food Premises.	Sweet Manufacturers and Retailers.	General Dealers and Grocers.	Fishmongers and Fishtriers.	Greengrocers.	Miscellaneous Food Premises, Vehicles, etc.	TOTALS.
New structures provided or extensive alterations and improvement .. ..	1	1	6	1	3	—	—	2	—	—	14
Other structural repairs .. ..	1	—	4	2	1	—	4	1	—	—	13
Additional sanitary accommodation .. ..	1	—	2	—	—	1	—	—	—	—	4
Repair of sanitary accommodation .. ..	—	—	1	—	—	—	—	—	—	—	2
Improved standard of cleanliness .. ..	1	—	13	5	8	—	12	3	—	—	45
Redecoration of premises .. ..	1	3	21	5	9	2	13	6	1	2	63
Improved washing facilities .. ..	1	—	6	3	3	—	3	1	1	7	25
Constant hot water supply .. ..	1	1	6	2	6	1	2	5	1	6	31
Premises in which additional sinks are provided .. ..	—	—	7	2	1	—	—	1	—	—	11
Cold storage accommodation .. ..	—	—	3	—	1	—	—	—	—	—	4
Improved food storage accommodation .. ..	1	—	4	2	3	—	—	1	—	—	11
Protection to open display of food .. ..	—	—	1	—	—	—	—	1	—	—	11
Accommodation for storage of outdoor clothing .. ..	—	—	1	1	—	—	—	1	1	—	3
Overalls and head coverings for employees .. ..	—	—	1	—	—	—	—	—	—	—	2
Provision of hygienic equipment .. ..	—	1	2	—	—	—	—	—	—	—	2
Provision of heating facilities in shop .. ..	—	—	3	—	3	—	—	1	—	—	8
Floors repaired or re-laid .. ..	—	—	—	1	2	1	—	—	—	—	—
Choked drains .. ..	—	—	5	—	—	—	—	—	—	—	9
Additional or improved drainage .. ..	—	—	2	—	1	—	—	2	—	—	7
Insect control measures adopted .. ..	—	—	—	1	1	—	1	1	—	—	2
Infestation of rats and mice (including food premises under annual contract) .. ..	4	1	35	1	6	6	10	4	2	1	70
Additional refuse accommodation .. ..	—	—	1	1	1	—	2	—	1	—	6
Offensive accumulations .. ..	—	—	1	1	—	—	—	—	—	—	2
Miscellaneous .. ..	1	1	—	—	—	—	2	1	—	—	5





